

**FEC
FORM 3****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

FRIENDS OF STEWART MILLS, INC.

ADDRESS (number and street)

PO BOX 1039

Check if different
than previously
reported. (ACC)

BRAINERD

MN

56401

2. FEC IDENTIFICATION NUMBER ▼

C

C00546739

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

MN

08

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y

in the
State of(c) 30-Day **POST**-Election Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the
State of

5. Covering Period

M M / D D / Y Y Y Y

11 / 25 / 2014

through

M M / D D / Y Y Y Y

12 / 31 / 2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Diane Johnson

Signature of Treasurer

Diane Johnson

[Electronically Filed]

Date

M M / D D / Y Y Y Y

01 / 29 / 2015

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3**
(Revised 02/2003)

FRIENDS OF STEWART MILLS, INC.

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))	85.00	1634345.39
(b) Total Contribution Refunds (from Line 20(d))	0.00	2500.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	85.00	1631845.39
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	14556.91	2022269.75
(b) Total Offsets to Operating Expenditures (from Line 14)	231.03	200.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	14325.88	2022069.75
8. Cash on Hand at Close of Reporting Period (from Line 27)	297.68	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	360000.00	

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3 (Revised 12/2003)

PAGE 3 / 18

Write or Type Committee Name

FRIENDS OF STEWART MILLS, INC.

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	5		2	0	1	4

To:

M	M	/	D	D	/	Y	Y	Y	Y
1	2		3	1		2	0	1	4

I. RECEIPTS
COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A).....

0.00

925246.50

(ii) Unitemized.....

85.00

345048.89

(iii) TOTAL of contributions from individuals ▶

85.00

1270295.39

(b) Political Party Committees.....

0.00

6600.00

(c) Other Political Committees (such as PACs).....

0.00

357450.00

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS

(other than loans)

(add Lines 11(a)(iii), (b), (c), and (d))..

85.00

1634345.39

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES

1630.46

77626.85

13. LOANS:

(a) Made or Guaranteed by the Candidate.....

0.00

364450.87

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS

(add Lines 13(a) and (b)).....

0.00

364450.87

14. OFFSETS TO OPERATING EXPENDITURES

(Refunds, Rebates, etc.)

231.03

200.00

15. OTHER RECEIPTS

(Dividends, Interest, etc.)

1.49

2286.69

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

1947.98

2078909.80

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 18

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	14556.91	2022269.75
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	4450.87
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	4450.87
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	1000.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	1500.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	2500.00
21. OTHER DISBURSEMENTS	0.00	1500.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	14556.91	2030720.62

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	12906.61
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	1947.98
25. SUBTOTAL (add Line 23 and Line 24).....	14854.59
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	14556.91
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	297.68

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 5 OF 18
 (check only one)
☐ 11a ☐ 11b ☐ 11c ☐ 11d
☒ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
FRIENDS OF STEWART MILLS, INC.

Full Name (Last, First, Middle Initial) A. Lakes Area Victory Fund		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 25 / 2014
Mailing Address 2470 Daniells Br Rd #121		Transaction ID : SA12.4164
City Athens	State GA	
Zip Code 30606		Amount of Each Receipt this Period 880.46
FEC ID number of contributing federal political committee. C C00566745	Occupation	
Name of Employer	Occupation	Transfer from JFC
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 880.46	

Full Name (Last, First, Middle Initial) B. MINNESOTA CONGRESSIONAL VICTORY FUND		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 25 / 2014
Mailing Address 2470 DANIELLS BR RD STE 121		Transaction ID : SA12.4137
City ATHENS	State GA	
Zip Code 30606		Amount of Each Receipt this Period 750.00
FEC ID number of contributing federal political committee. C C00558742	Occupation	
Name of Employer	Occupation	Transfer from JFC
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 750.00	

Full Name (Last, First, Middle Initial) C.		Date of Receipt M M / D D / Y Y Y Y Y Y
Mailing Address		
City	State	
Zip Code		Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. C	Occupation	
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

SUBTOTAL of Receipts This Page (optional).....	1630.46
TOTAL This Period (last page this line number only).....	1630.46

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 6 OF 18

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

FRIENDS OF STEWART MILLS, INC.

Full Name (Last, First, Middle Initial)

A. ASPECT CONSULTING LLC

Mailing Address 8401 EXCELSIOR DRIVE

City	State	Zip Code
MADISON	WI	53717

Purpose of Disbursement
Compliance Consulting

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		02		2014

Amount of Each Disbursement this Period

2000.00

Transaction ID : SB17.4120

B. CAMPAIGN STORE

Mailing Address 1760 W SEQUOIA VISTA CIR

City	State	Zip Code
SALT LAKE CITY	UT	84104

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		29		2014

Amount of Each Disbursement this Period

166.00

Transaction ID : SB17.4117

C. CONNECTIVIST MEDIA

Mailing Address 544 E OGDEN AVENUE

City	State	Zip Code
MILWAUKEE	WI	53202

Purpose of Disbursement
Online Ads

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		18		2014

Amount of Each Disbursement this Period

7748.71

Transaction ID : SB17.4128

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

9914.71

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 7 OF 18

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

FRIENDS OF STEWART MILLS, INC.

Full Name (Last, First, Middle Initial)

A. FP1 STRATEGIES LLC

Mailing Address PO BOX 16504

City	State	Zip Code
ALEXANDRIA	VA	22302

Purpose of Disbursement
Media Consulting

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		28		2014

Amount of Each Disbursement this Period

4000.00

Transaction ID : SB17.4138

B. ISTREAM

Mailing Address 13555 BISHOPS COURT

City	State	Zip Code
BROOKFIELD	WI	53005

Purpose of Disbursement
Check Processing Fee

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		03		2014

Amount of Each Disbursement this Period

28.00

Transaction ID : SB17.4123

C. PIRYXMailing Address 144 2ND STREET
1ST FLOOR

City	State	Zip Code
SAN FRANCISCO	CA	54105

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		15		2014

Amount of Each Disbursement this Period

29.00

Transaction ID : SB17.4125

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

4057.00

SCHEDULE C (FEC Form 3)
LOANS

PAGE 10 OF 18

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4104

FRIENDS OF STEWART MILLS, INC.

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2014

STEWART C. MILLS III

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

22849 OLD GOVERNMENT TRAIL

City

State

ZIP Code

NISSWA

MN

56468

Original Amount of Loan

47230.00

Cumulative Payment To Date

4450.87

Balance Outstanding at Close of This Period

42779.13

TERMS

Date Incurred

M M / D D / Y Y Y Y
06 / 16 / 2014

Date Due

M M / D D / Y Y Y Y
12/31/2018

Interest Rate

0.00 % (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

42779.13

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 11 OF 18

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4106

FRIENDS OF STEWART MILLS, INC.

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2014

STEWART C. MILLS III

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

22849 OLD GOVERNMENT TRAIL

City

State

ZIP Code

NISSWA

MN

56468

Original Amount of Loan

36000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

36000.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
06 / 29 / 2014

Date Due

M M / D D / Y Y Y Y Y Y
/ 12/31/18

Interest Rate

0.00 % (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

36000.00

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 12 OF 18

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4110

FRIENDS OF STEWART MILLS, INC.

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2014

STEWART C. MILLS III

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

22849 OLD GOVERNMENT TRAIL

City

State

ZIP Code

NISSWA

MN

56468

Original Amount of Loan

46000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

46000.00

TERMS

Date Incurred

M M / D D / Y Y
07 / 22 / 2014

Date Due

M M / D D / Y Y
/ 1/1/16

Interest Rate

0.00 % (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

46000.00

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 13 OF 18

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4107

FRIENDS OF STEWART MILLS, INC.

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2014

STEWART C. MILLS III

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

22849 OLD GOVERNMENT TRAIL

City

State

ZIP Code

NISSWA

MN

56468

Original Amount of Loan

82270.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

82270.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
08 / 11 / 2014

Date Due

M M / D D / Y Y Y Y
1/1/16

Interest Rate

0.00 % (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

82270.00

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 14 OF 18

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4108

FRIENDS OF STEWART MILLS, INC.

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2014

STEWART C. MILLS III

☐ Primary☒ General☐ Other (specify) ▼

Mailing Address

22849 OLD GOVERNMENT TRAIL

City

State

ZIP Code

NISSWA

MN

56468

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

50000.00

0.00

50000.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M / D D / Y Y Y Y
10 06 / 2014M M / D D / Y Y Y Y
1/1/16M M / D D / Y Y Y Y
1/1/16M M / D D / Y Y Y Y
1/1/16

0.00

% (apr)

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

50000.00

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 15 OF 18

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4109

FRIENDS OF STEWART MILLS, INC.

LOAN SOURCE Full Name (Last, First, Middle Initial)

STEWART C. MILLS III

[PERSONAL FUNDS]

Election: 2014

☐ Primary☒ General☐ Other (specify) ▼

Mailing Address

22849 OLD GOVERNMENT TRAIL

City

NISSWA

State

MN

ZIP Code

56468

Original Amount of Loan

25000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

25000.00

TERMS

Date Incurred

M M / D D / Y Y
10 / 15 / 2014

Date Due

M M / D D / Y Y
/ 1/1/16

Interest Rate

0.00 % (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

25000.00

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 16 OF 18

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4102

FRIENDS OF STEWART MILLS, INC.

LOAN SOURCE Full Name (Last, First, Middle Initial)

STEWART C. MILLS III

[PERSONAL FUNDS]

Election: 2014

☐ Primary☒ General☐ Other (specify) ▼

Mailing Address

22849 OLD GOVERNMENT TRAIL

City

NISSWA

State

MN

ZIP Code

56468

Original Amount of Loan

77950.87

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

77950.87

TERMS

Date Incurred

M M / D D / Y Y
10 / 22 / 2014

Date Due

M M / D D / Y Y
12/31/16

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

77950.87

TOTALS This Period (last page in this line only)..... ►

360000.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE D (FEC Form 3)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 17 OF 18

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

FRIENDS OF STEWART MILLS, INC.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

ASPECT CONSULTING LLC

Nature of Debt (Purpose):

Compliance Consulting - Primary 2014

Mailing Address 8401 EXCELSIOR DRIVE

City State

Zip Code

MADISON

WI

53717

Outstanding Balance Beginning This Period

2000.00

Transaction ID : SD10.4111

Amount Incurred This Period

0.00

Payment This Period

2000.00

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

CONNECTIVIST MEDIA

Nature of Debt (Purpose):

Online Ads - General 2014

Mailing Address 544 E OGDEN AVENUE

City State

Zip Code

MILWAUKEE

WI

53202

Outstanding Balance Beginning This Period

7748.71

Transaction ID : SD10.4113

Amount Incurred This Period

0.00

Payment This Period

7748.71

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

FP1 STRATEGIES LLC

Nature of Debt (Purpose):

Media Consulting - Primary 2014

Mailing Address PO BOX 16504

City

State

Zip Code

ALEXANDRIA

VA

22302

Outstanding Balance Beginning This Period

7000.00

Transaction ID : SD10.4115

Amount Incurred This Period

0.00

Payment This Period

4000.00

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional) ▶

0.00

2) **TOTALS** This Period (last page this line number only) ▶

0.00

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

: 97 `A=G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+9A=N5HCB
.

Form/Schedule: SD10
Transaction ID : SD10.4115

(Current loan amount of 3000.00 from a balance of 7000.00 has been forgiven)

Form/Schedule:
Transaction ID: